



Harbor Animal Hospital
288 Market Street
Warren, RI, 02885
(401) 245-9090

Boarding Release Form

Client Name: _____
Address: _____
Telephone: _____
Emergency #: _____
Emergency #: _____

Patient Name: _____
Breed: _____
Sex: _____
Color/Markings: _____
Birth date: _____

Please tell us a little about your pet.

1. Does your pet have any behavioral issues? This may include aggression toward certain subjects, possessiveness, anxiety, bad habits, etc. The more we know about your pet, the better we can attend to his/her needs. YES NO
If yes, please elaborate.

2. Does your pet have any health issues? YES NO
If yes, please elaborate.

3. Is your pet on any medication? YES NO
If yes, please indicate medication and dosage.

4. Does your pet have any allergies? YES NO
If yes, please elaborate.

5. Please specify your pet's feeding instructions.

If you did not bring your pet's food, or if your pet runs out of food, we will supply Hills "Digestive Care" dry food for an additional cost of \$4.00 per day.

6. In the event your pet is not eating, may we provide a small amount of Hills "Digestive Care" canned wet food? YES NO

7. Is your pet okay to be given bedding and blankets for their stay? YES NO

8. Please include any useful commands/words your pet may follow. We will try our best to enforce these good behaviors!

9. May we assess and include your pet in our daycare? YES NO

10. May we use photos of your pet for our website/social media pages? YES NO

11. Please provide us with an email address if you would like to receive an update during your pet's stay.

In the event that _____ suffers cardiac or respiratory arrest:

_____ I authorize the doctors and staff at Harbor Animal Hospital to perform CPR (Cardiopulmonary Resuscitation) on my pet. This may including but is not limited to external chest compressions, intubation/oxygen, IV catheters, fluids, blood work, EKG, blood pressure monitoring, and/or emergency medication. I assume the full responsibility of the cost of this procedure.

_____ I DO NOT authorize any CPR attempt. No resuscitation efforts will be made, however I authorize support to keep my pet comfortable until I can be reached.

By signing this release form, I acknowledge that I have read, understood and I am in agreement with its provisions.

